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ABSTRACT

This digest discusses a variety of methods that community colleges have employed to integrate health care into the curriculum and campus services. Providing health care in community colleges is particularly challenging due to the lack of institutional resources, as compared with four-year colleges and universities where the residential living situation necessitates on-campus health care facilities. Since community colleges have so few resources, they are often unable to support any kind of clinical structure. The few existing facilities are rarely comprehensive and unlikely to maintain full-time staffs. In addition, community colleges have the largest populations of low-income and minority students, who are generally more at risk for health problems due to their economic and social circumstances. Competent prevention strategies, such as promoting health in curricular content, peer education, and service learning opportunities, should be pursued by community colleges. Partnering with local organizations and hospitals might also be an effective means of providing health care on campus. Finally, making students aware of what is available in the community, or bringing those services to them, may be the most responsible way a community college can offer health services to its students. (Contains 11 references.) (EMH)

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ERIC Clearinghouse for Community Colleges

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Digest

November, 1998 EDO-JC-98-15

Promoting Good Health for Community College Students

By Kristen J. McKinney

Educators have long been aware that a student who is unwell may be hindered in his or her capacity to learn. Four–year colleges and universities, due to their residential nature, have established facilities to maintain good health for their students. Providing healthcare in community colleges, however, is particularly challenging because of the lack of institutional resources. Limitations on providing reliable, professional treatment for today's complex health issues have caused community colleges to heighten their preventative programs through peer education and curricular offerings.

Background

At one time, taking care of students' health meant little more than ensuring that they had adequate room and board. As higher education expanded and students began to reside in community living situations, organized student health services such as clinics and infirmaries were created to control the spread of infectious disease on campus (Christmas, 1995). In the 1960s, the wave of student discontent with higher education led to calls for better services. Women demanded reproductive health care and crisis care for victims of violence, while the spread of drug and alcohol use on campus led to increased demand for treatment and prevention programs (Kaplan, Whipple, & Wright, 1996).

As more complex health problems arise among the student population, college health services are trying to keep up with demands for new services. As the institutions with the fewest resources, community colleges are often unable to support any kind of clinical structure. The few existing facilities are rarely comprehensive and are unlikely to maintain full-time staffs. In addition to having the fewest resources, community colleges also have the largest populations of low-income and minority students who are generally more at risk for health problems due to their economic and social circumstances. A recent national survey of health risk behaviors showed that students at community colleges are more likely to engage in high-risk behaviors such as unprotected sexual intercourse, frequent cigarette use, and use of cocaine than their counterparts at four-year colleges (Douglas and others, 1997). How then do community colleges manage to care for the health of their students under these difficult circumstances?

Treatment

Although there are no national statistics that give a complete overview of the health services available on community college campuses, a picture can be constructed by looking at data from several different studies. In a survey of 535 community colleges conducted by the American Association of Community Colleges (AACC) regarding services for HIV prevention, nearly two-thirds of the colleges reported offering no related health services. A scant 8 percent had a full-time campus health center, and only 17 percent offered any testing for sexually transmitted diseases (Ottenritter & Barnett, 1998). In California, a state with a relatively large and well-developed community college system, 11 of the 71 community college districts reported in a 1990 survey that they offered no health services (McIntyre, 1990). Those campuses that provide physician's services generally only do so on a part-time basis, while others opt for health services staffed only by a full- or part-time nurse or nurse-practitioner. Some colleges use campus health services as the training ground for their nursing students. Other colleges are beginning to look further into the community for assistance. Many, like Kirkwood Community College in Iowa, have partnered with local agencies to provide health services and education (Nielsen, 1996).

Prevention

There has been an increasing awareness in the health professions that many of the major health issues facing college students stem from lifestyle choices and behaviors, such as diet and exercise, consumption of alcohol and other drugs, and unsafe sexual practices (Deutsch, 1997). This awareness has led to a greater focus on prevention efforts as a means for insuring good health. Prevention efforts are generally much less expensive than providing treatment and are easier to scale up or down according to budget fluctuations.

Colleges have come up with a variety of methods for integrating prevention into the curriculum and campus activities. Curricular infusion of health promotion topics has been pursued quite extensively by community colleges. For example, in California, of 94 colleges responding to a survey, two-thirds had HIV subject matter introduced into course curricula (California Community Colleges, 1990). The majority of curricular integration appears in the health and science fields, but some colleges report including health information in units of English, Sociology, Statistics, and many other disciplines (California Community Colleges, 1990; Ottenritter & Barnett, 1997). Some community colleges offer entire courses on a particular health issue. A course developed by the North Carolina Department of Community Colleges to deal with HIV/AIDS prevention has modules on the etiology, treatment, and prevention of HIV, as well as sections that deal with attitudinal issues such as homophobia, and those which focus on

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AIDS policymaking (Eller, Bobbitt-Cooke, & Winstead, 1991). Other prevention efforts used by community colleges include informational workshops, guest lectures, internet sites, information in college newspapers, and distribution of materials at student orientation, advising, and registration events (McIntyre, 1990; Ottenritter & Barnett, 1998).

Peer Involvement

Many prevention efforts at community colleges integrate peer involvement. In their "Bridges to Healthy Communities" project sites, AACC encouraged the colleges to blend curricular infusion and peer involvement through service learning (Ottenritter & Barnett, 1998). For example, the "Stop AIDS in DuPage" project at the College of DuPage (Glen Ellyn, IL) allows community college students to work directly with HIV/AIDS patients and projects as a course component. At Pitt Community College (Greenville, NC), service learning activities involve peer education programs to encourage students to adopt healthier lifestyles.

Conclusions and Recommendations

In an opinion column of the *Chronicle of Higher Education*, Keeling (1991) warned that effective prevention is about more than simple information dissemination, and noted that attention must be paid to cultural factors, skill building, and self-esteem. By moving into more intensive and integrated efforts for health promotion such as curricular content, peer education, and service learning opportunities, community colleges are attempting to incorporate these recommendations.

Looking beyond prevention, what can colleges do to assist those students who already have health problems? Colleges must be sure that the services they do provide are of high quality. It may be better for some colleges to have no services rather than poor services. However, this does not mean that they must leave their students with no options for health services. Colleges should explore the possibilities of partnerships with local community organizations and hospitals to provide services on campus, making them more accessible to students in need. Making students aware of what is available in the community or bringing those services to them may be the most responsible thing a community college can do to provide health services to their students.

References

California Community Colleges. *The HIV Epidemic and Community Colleges: A Report to the Legislature in Response to Senate Concurrent Resolution 79*. Sacramento, CA: Author, Office of the Chancellor, 1990. (ED 315 128)

Christmas, W. A. "The Evolution of Medical Services for Students at Colleges and Universities in the United States." *Journal of American College Health*, 1995, *43*, 241-246.

Deutsch, C. "Health and the Community College: What's the Big Idea?" In Ottenritter, N. and Barnett, L. *Bridges to Healthy Communities. AACC Project Brief # AACC-PB-97-1*. Washington, DC: American Association of Community Colleges, 1997. (JC 980 366)

Douglas, K. A. and others. "Results from the 1995 National College Health Risk Behavior Survey." *Journal of American College Health*, 1997, *46*, 55-66.

Eller, V. M., Bobbitt-Cooke, M., and Winstead, K. *Preventing AIDS Tomorrow Through Education Today*. Raleigh: North Carolina State Department of Community Colleges, 1991. (ED 351 059)

Kaplan, J., Whipple, E. G. and Wright, J. "Student Health." In Rentz, A. L. (ed.) *Student Affairs Practice in Higher Education*. Springfield, IL: Charles C. Thomas, Publisher, LTD, 1996.

Keeling, R. P. "Student Health in the 1990s." *Chronicle of Higher Education*, October 9, 1991, B1.

McIntyre, C. *California Community Colleges Health Services Survey*. Sacramento: Office of the Chancellor, California Community Colleges, 1990. (ED 321 802)

Nielsen, N. *Partnerships: Door to the Future for Community Colleges*. Cedar Rapids, IA: Kirkwood Community College, 1996. (ED 395 635)

Ottenritter, N. and Barnett, L. *Bridges to Healthy Communities. AACC Research Brief # AACC-PB-97-1*. Washington, DC: American Association of Community Colleges, 1997. (JC 980 366)

Ottenritter, N. and Barnett, L. *Community Colleges Tackle Student Health and HIV/AIDS. AACC Research Brief # AACC-RB-98-3*. Washington, DC: American Association of Community Colleges, 1998. (ED 419 574)

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